

**UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF VIRGINIA
UNITED STATES PROBATION OFFICE**

JOHN R. LONG
CHIEF U.S. PROBATION OFFICER

401 Courthouse Square
Alexandria 22314-5797
703-299-2300

March 8, 2004

REPLY TO: Richmond

Suite 1
320-B Charles Dimmock Parkway
Colonial Heights 23834
804-504-7520

Suite 217
100 Riverside Parkway
Fredericksburg 22405
540-361-1600

Suite 100
10500 Battleview Parkway
Manassas 20109
703-366-2100

Suite 300
1001 Omni Boulevard
Newport News 23606
757-223-4640

Suite 200, U.S. Courthouse
600 Granby Street
Norfolk 23510
757-222-7300

Room 205, U.S. Courthouse Annex
1100 East Main Street
Richmond 23219
804-916-2500

**RE: United States of America v.
Lamont C. Knight
Richard A. Hertz, Sr.
Thomas W. Hofler, Jr. and
Clyde E. Austin, Jr.**

Docket No. 3:03CR211

To Whom It May Concern:

The Mandatory Victims Restitution Act of 1996 requires the Federal Probation Office to provide notice of the following information to all identified victims harmed as the result of the commission of a Federal offense. Our records indicate you may be a victim of the above-cited case. Federal law entitles you to receive notice of the defendant's conviction and his/her sentencing date. Also, as a result of the defendant's crime, you may be entitled to be compensated with restitution; and you have the right to prepare the enclosed declaration which will be submitted to the Court by our office on your behalf.

On December 19, 2003, defendant Clyde E. Austin, Jr., pled guilty to charges of Mail Fraud, Money Laundering, and Money Laundering Conspiracy. The sentencing hearing for Mr. Austin is presently scheduled for 1:00 p.m. on June 17, 2004, at the U.S. District Court, located at Richmond, Virginia, before The Honorable James R. Spencer.

On February 18, 2004, Lamont C. Knight, Richard A. Hertz, Sr., and Thomas W. Hofler, Jr., were convicted during a jury trial of multiple charges, including Wire Fraud, Money Laundering, Money Laundering Conspiracy, and Perjury. The sentencing hearing for Messrs. Knight, Hertz, and Hofler is presently scheduled for 9:00 a.m. on May 26, 2004, at the U.S. District Court, located at Richmond, Virginia, also before The Honorable James R. Spencer.

Your attendance at these proceedings is not required, but you are welcome to attend if you choose. If you attend, you may be given an opportunity to speak directly to the Judge regarding the emotional, physical, or monetary impact of this crime on you or your family.

Re: United States v. Knight, Hertz, Hofler, and Austin

Whether or not you elect to attend these sentencing proceedings, you have the right to file an affidavit relating the harms and costs you have incurred as a result of the above offenses. According to our records, you may be entitled to restitution. However, our office cannot guarantee that restitution, or any particular amount of restitution will be awarded to you at sentencing. That determination will be made by the Court. A Declaration of Victim Losses, Modified Probation Form 72, which has the same legal effect as an affidavit, but which need not be notarized, is enclosed for your use. If you wish to exercise your right to submit an affidavit, please return the signed Probation Form 72 and DF-63B to the U.S. Probation Office. The U.S. Probation Office will submit the forms to the Court on your behalf, but in order to ensure timely submission to the Court, a Probation Form 72 and DF-63B, or any letter you wish to submit, should be received by the U.S. Probation Office no later than **April 2, 2004**.

In the event you are awarded restitution by the Court in this case, it is your responsibility to notify the U.S. Attorney's Office in this district and the Clerk of the Court of any change in your mailing address while restitution is still owed. This information will be maintained confidentially.

Finally, if you are awarded restitution by the Court, you may request that the Clerk of the Court issue an Abstract of Judgment to you, certifying that a judgment has been entered in your favor in the amount specified by the Court. When the Abstract is registered, recorded, docketed, or indexed in accordance with State law, it acts as a lien upon the property of the defendant within the State, and is enforceable in the same manner and to the same extent as a judgment of a court of general jurisdiction.

For your convenience, the address of the various offices referred to above are included below:

U.S. Probation Office

Room 205, 1100 East Main Street
Richmond, Virginia 23219-3538

U.S. District Court - Clerk's Office

1000 East Main Street, Suite 305
Richmond, Virginia 23219-3514

U.S. Attorney's Office

Main Street Centre, 600 East Main Street, Suite 1800
Richmond, Virginia 23219-2430

Please do not contact the U.S. Attorney's Office regarding this letter. Rather, please forward your letter, or Declaration of Victim Losses and Worksheet to the assigned Probation Officer in Richmond, Virginia, as noted below. Should you have any questions concerning this letter, please feel free to telephone the assigned U.S. Probation Officers directly.

For defendants Lamont C. Knight and Clyde E. Austin, Sr.

Mr. Blakely D. Brown
Senior U.S. Probation Officer
804/916-2531

Re: United States v. Knight, Hertz, Hofler, and Austin

For defendant Richard A. Hertz, Sr.

Ms. Susan A. Newlen
U.S. Probation Officer
804/916-2536

For defendant Thomas W. Hofler, Jr.

Ms. Beth A. Ault
Senior U.S. Probation Officer
804/916-2510

Sincerely,

The U.S. Probation Office for the Eastern District of Virginia, Richmond Division

BDB/vmb

Enclosures

cc: DCUSPO/SUSPO Wolinski

**UNITED STATES DISTRICT COURT
FOR THE
EASTERN DISTRICT OF VIRGINIA**

Declaration of Victim Losses

United States

v.

**Lamont C. Knight
Richard A. Hertz, Sr.
Thomas W. Hofler, Jr. and
Clyde E. Austin, Jr.**

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3:03CR211

(Case Number)

I, _____, residing at _____, in the city
(or county) of _____, in the State of _____, am victim in the above-referenced
case and I believe that I am entitled to restitution in the total amount of \$_____.

My specific losses as a result of this offense are summarized as follows:

(Please itemize each loss)

I have been compensated by insurance or another source with respect to all or a portion of my losses
in the amount of \$_____. I have marked above those losses for which I have been
compensated with a check (✓). The name and address of my insurance company (or other
compensator) and the claim number for this loss is as follows:

**Insurance Co.
(or other
Compensator)**

Address

Telephone #

**Account and/or
Claim #**

I declare under penalty of perjury that the foregoing is true and correct.

(Signature)

Executed on _____ day of _____,
at (City/County) _____, (State) _____.

(Additional Pages May be Attached if Necessary)

Explanation of Losses Subject to Restitution

In accordance with Federal law, you may be entitled to an order of restitution for certain losses suffered as a result of the commission of the offense(s) for which the defendant was convicted. The types of losses for which the statute provides restitution are explained below. You have the right to explain these losses in detail in the enclosed *Declaration of Victim Losses*.

In the case of an offense resulting in damage to or loss or destruction of property of a victim of the offense, the Court may order: The return of the property to the owner of the property or someone designated by the owner; or, if return of the property is impossible, impractical, or inadequate, the Court may order payment in an amount equal to the greater of the value of the property on the date of the damage, loss, or destruction, or the value of the property on the date of sentencing, less the value (as of the date the property is returned) of any part of the property that is returned.

In the case of an offense resulting in bodily injury to a victim, the Court may order: Payment of an amount equal to the cost of necessary medical and related professional services and devices related to physical, psychiatric and psychological care, including non-medical care and treatment rendered in accordance with a method of healing recognized by the law of the place of treatment; payment of an amount equal to the cost of necessary physical and occupational therapy and rehabilitation; and reimbursement to the victim for income lost by such victim as a result of such offense.

In the case of an offense resulting in bodily injury that also results in the death of a victim, the Court may order payment of an amount equal to the cost of necessary funeral and related services. In a case involving a conviction of 18 U.S.C. §§ 2243 (sexual abuse of a minor), 2251 (sexual exploitation of children) or 2261 (domestic violence), the Court may order restitution for any losses suffered by a victim, including, in addition to those listed above, costs for medical services relating to physical, psychological care, physical and occupational therapy or rehabilitation, necessary transportation temporary housing, child care expenses, lost income, attorney's fees, as well as other costs incurred, and any other losses suffered by a victim from the offense.

In any case, the Court may order reimbursement to the victim for lost income and necessary child care, transportation, and other expenses related to participation in the investigation or prosecution of the offense or attendance at proceedings related to the offense. In any case, if the victim (or if the victim is deceased, the victim's estate) consents, the Court may order the defendant to make restitution in services in lieu of money, or make restitution to a person or organization as designated by the victim or the victim's estate.

In addition, the victim may at any time assign the victim's interest in restitution payments to the Crime Victims Fund in the Treasury without in any way impairing the obligation of the defendant to make such payments. If the victim has received compensation from insurance or any other source with respect to a loss, the Court shall order that restitution be paid to the person who provided or is obligated to provide the compensation; but, the restitution order shall provide that all restitution of victims required by the order be paid to the victims before any restitution is paid to such a provider of compensation.

UNITED STATES PROBATION OFFICE
EASTERN DISTRICT OF VIRGINIA

DECLARATION OF VICTIM LOSSES WORKSHEET

Please use this portion of the form to list any expenses you have had or paid as a result of this crime. Some of the sections may not apply in your case. Please attach copies of all records necessary to support your losses or costs listed below. Attach additional pages as needed.

A. Crime Related Losses and/or Costs (Business)

1. If your business/institution sustained financial loss as a result of this incident, please describe the nature and extent of your losses. Please provide specific figures if possible.

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

2. If your business/institution was adversely affected in ways other than financially, please provide an explanation of these circumstances below.

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

B. Crime Related Losses and/or Costs (Individual)

1. List your loss of personal property or belongings resulting from this crime, including damage to or destruction of your property. You may also include expenses associated with your losses.

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

2. List any medical expenses incurred as a result of this crime. You may wish to include expenses for doctors, medications, hospitalization, physical or occupational therapy, counseling, psychiatric treatment, medical supplies, etc.

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

3. Please describe any future medical or counseling expenses your doctor or therapist anticipates. Attach an estimate of these costs from the provider.

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

4. If there were any funeral expenses, please list them.

_____ \$ _____

5. Please list other related expenses which you incurred. You may wish to include such items as child care, transportation costs for medical treatment or court appearances, fees incurred with banks and credit card companies, etc.

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

6. Please indicate the total amount of money you lost in wages, if applicable. This may include income or wages lost due to inability to work because of the crime, attending court, or visits to your doctor or therapist.

Amount of lost wages or income: \$ _____

C. Money you or your business were paid by insurance, victim compensation, or other sources. Whenever possible, attach copies of receipts of insurance payments.

1. Business

If your business sustained financial losses, what portion was covered by insurance or some other form of reimbursement?

\$ _____

Name of company _____

Claim No. _____

Address _____

Phone No. _____

2. Personal

Property, auto, or homeowners insurance: \$ _____

Name of company _____

Claim No. _____

Address _____

Phone No. _____

Medical insurance: \$ _____

Name of company _____

Claim No. _____

Address _____

Phone No. _____

Other--list sources and amounts:

\$ _____

3. Have you applied for crime victim compensation benefits? Yes _____

No _____

If you received compensation as a result of your claim, please list the amount:

\$ _____

Total money received from insurance, crime victim compensation, and other sources: \$ _____

Upon completion of this worksheet, please attach it to your Declaration of Victim Losses, Modified Probation Form 72; and return it to the United States Probation Office by March 26, 2004.

BUSINESS

Name: _____ Signature: _____ Date: _____

Official Capacity: _____

Business Address: _____ City: _____ State: _____ Zip Code: _____

Home Telephone Number: _____ Work Telephone Number: _____

PERSONAL

Name: _____ Signature: _____ Date: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Home Telephone Number: _____ Work Telephone Number: _____